

EMR Youth Nurses Initiative – International Nurses Day 2026 Webinar

“Empowering EMR Youth Nurses Saves Lives – An Intergenerational Dialogue”



Date: Saturday, 9 May 2026

Time: 17:00–18:15 UTC

Platform: Zoom Webinar

Theme: Our Nurses, Our Future: Empower Nurses to Save Lives

1. Executive Summary

On 9 May 2026, the Eastern Mediterranean Region Youth Nurses Initiative (EMR-YNI) convened a 60-minute International Nurses Day webinar that brought together 112 registered participants from 17 countries. The event, structured as an intergenerational dialogue, created a powerful space for senior nursing leaders and youth nurses to jointly explore what it truly means to empower nurses to save lives in one of the world’s most crisis-affected regions.

The webinar fulfilled its core purpose: to move beyond symbolic celebration and serve as a strategic regional platform for policy dialogue, storytelling, and collective commitment. Highlights included a deeply moving testimony from a nurse and PhD candidate who completed his doctorate while living in a tent in Gaza under continuous attack; a call by a former nursing syndicate president to build professional power through knowledge, experience, and relationships; an insistence by deans and professors that interprofessional education must be mandatory and that young nurses belong at decision-making tables; and the launch of a cross-border advocacy push that extended the conversation beyond the live session.

This report presents the proceedings, synthesizes the key messages, analyses participant engagement, and proposes a set of actionable follow-up activities grounded in the dialogue.

2. Background and Strategic Context

International Nurses Day 2026 falls at a time when the Eastern Mediterranean Region (EMR) is experiencing a convergence of armed conflict, humanitarian emergencies, workforce shortages, and systemic marginalization of nurses from health governance. According to the WHO EMRO situation report cited in the webinar’s concept note, 15 of 22 EMR countries are affected by active armed conflict or complex emergencies, and 115 million people require health assistance. In such settings, nurses – particularly youth nurses under the age of 35 – are not only the largest segment of the health workforce but also the first and last point of contact for communities, often holding fragile health systems together with limited resources, protection, or recognition.

The EMR Youth Nurses Initiative (EMR-YNI) was established to respond to these realities. It provides an inclusive, supportive, and honest regional space where young nurses can connect, share experiences, learn, and grow with the guidance of senior colleagues. The webinar was conceived as a means to

translate frontline nursing experience into policy-relevant priorities, bridge generations of nursing leadership, and catalyze collective youth-led action aligned with WHO and ICN agendas.

3. Webinar Objectives

The webinar aimed to:

- **Articulate** the lived realities of youth nurses across the EMR, translating frontline challenges into a coherent set of region-specific priorities.
- **Advance** the role of nurses from service providers to system leaders by identifying concrete entry points for youth participation in policy, academic, and civil society leadership structures.
- **Generate** a collective regional position through an open intergenerational dialogue that would inform a forthcoming Youth-Led EMR Nurses Position Statement.
- **Activate** a sustainable cross-border network by inviting participants into EMR-YNI working groups and fostering post-webinar collaboration.

4. Event Proceedings

4.1 Opening Session

Ahmed G. Sallam, EMR-YNI Lead, opened the webinar by welcoming nurses, novice nurses, and students from across the 22 EMR countries and beyond. He emphasized that International Nurses Day is not a single event but a series of ongoing activities centered on the message “*Save nurses. Save lives.*” He then introduced **Prof. Arwa Oweis**, Senior Advisor to EMR-YNI and Professor of Nursing at Jordan University of Science and Technology, as the “mother of this initiative.”

In her opening remarks, Prof. Oweis stressed that the ICN theme – *Our Nurses, Our Future: Empower Nurses to Save Lives* – is not a slogan in the EMR but a daily reality. She highlighted how nurses across the region work under exceedingly difficult conditions, often going far beyond their expected roles, leading care, supporting communities, and holding health services together when systems become fragile. She underscored the gap between the crucial work youth nurses perform and their continued exclusion from leadership and policy tables. The initiative, she explained, was created precisely to bridge this gap, not through a parallel structure, but by building bridges between generations, between practice and policy, and between countries facing shared challenges. She warmly acknowledged the panelists and handed over to the moderator.

4.2 EMR-YNI Updates

Ahmed G. Sallam presented a concise overview of the EMR Youth Nurses Initiative, highlighting its foundation as a regional platform that emerged from a 2017 conversation with Dr. Nuhad Dumit and was formally structured 18 months ago. Key elements shared:

- **Vision:** Empower young nurses to be leaders in nursing, innovation, research, and healthcare transformation.
- **Mission:** Create a collaborative environment for leadership development, professional growth, and nursing education.
- **Core values:** Collaboration, empowerment, innovation, diverse voices, and sustainability.
- **Five strategic objectives:** Youth leadership development; collaborative nursing research; strengthening nursing education; public health and community engagement; and global health advocacy.
- **Structure:** A senior advisory board, multiple working groups, and a forthcoming regional steering committee.
- **Partnerships:** Engagement with WHO, Ministries of Health, National Nursing Associations, universities, and global organizations.

He highlighted successful national youth-led initiatives in Sudan (SNSF), Lebanon (LNSA), and Oman as building blocks for a unified regional voice, and invited all participants to join the working groups.

4.3 Intergenerational Panel Discussion

Moderated by **Hagar Ibrahim**, a newly graduated nurse and youth advocate, the panel brought together four leaders representing different generations and contexts.

Prof. Nuhad Dumit (Lebanon) – Professor, American University of Beirut; former President of the Order of Nurses in Lebanon; EMR-YNI Advisory Board Member.

Theme: Moving nurses from the margins to decision-making roles.

Prof. Dumit grounded her reflections in her experience of leading transformative legislative change to update the legal scope of nursing practice in Lebanon. She argued that nursing regulation is not a bureaucratic exercise but a tool that protects both nurses and the public. It gives the profession legitimacy to voice positions, demands, and rights. She called on young nurses to build three types of power bases:

1. **Power base of knowledge** – Continuously read, learn, reflect, and share; not only learn for oneself but for the profession.

2. **Power base of experience** – Gain experience through workplace practice, and crucially, through volunteering, which shapes both the nurse and the human being.
3. **Power base of relationships** – Engage with others, not work *for* them but *with* them; change the narrative away from outdated hierarchical and military terminology (e.g., replace “medical order” and “head nurse” with language that reflects partnership and leadership).

She insisted that autonomy in healthcare is not independent but *interdependent*. Nurses must lead the teaching of other professions on how to work together, placing the patient and community needs at the center.

Prof. Arwa Oweis (Jordan) – Professor of Nursing, Jordan University of Science and Technology; Senior Advisor, EMR-YNI; former WHO EMRO workforce lead.

Theme: Collaboration and system-wide change.

Prof. Oweis deepened the discussion on collaboration, stressing that it is a concept often described but only truly understood through lived experience and wisdom. She highlighted that for collaboration to thrive; the entire health system must be structured to promote it. This requires reciprocal dynamics, strong communication skills, ethical conduct, and a clear understanding of one’s scope of practice and that of other team members. She observed that even within nursing units, nurses sometimes struggle to communicate respectfully and recognize each other’s expertise. System change, she argued, must begin at the grassroots, within nursing teams, and extend upward through management and leadership. She endorsed the role of youth nurses as “system disruptors” who challenge the status quo to make systems more effective and efficient.

At this point, **Prof. Majeda El-Banna (Qatar)** was invited to intervene from an academic perspective. She declared that interprofessional education (IPE) must be mandatory, integrated throughout curricula, in research, and in promotion criteria. Leaving collaboration to chance is not an option; it is an ethical obligation to students and to the patients they will serve.

Dr. Fadi Esleem (Palestine) – Nurse Leader, PhD Candidate, EMR-YNI Champion.

Theme: Resilience, hope, and the cost of stopping.

Dr. Esleem offered the panel’s most searing testimony. He completed his PhD during the war in Gaza. His home was destroyed; he and his family were displaced to a tent where rain and extreme heat made daily life almost unbearable. Without electricity, he queued for hours at solar charging points to power his laptop. He was injured twice, worked on the front lines, and then returned to his tent to search for water and food for his children before continuing his research. Hospitals were attacked; colleagues were killed, imprisoned, or shot at. Despite this, he finished his doctorate and later secured a postdoctoral fellowship in Malaysia.

His core message: *“Stopping is not neutral. Stopping costs lives.”* He insisted that resilience is not just about enduring hardship but about refusing to let those conditions define the limits of one’s impact. Even in the most constrained environments, a nurse’s voice, evidence, and leadership can save lives.

Ahmed G. Sallam (Egypt) – Lead, EMR-YNI.

Theme: Youth leadership as the present, not just the future.

Moved by Dr. Esleem’s story, Ahmed Sallam humbly stated that his own extensive regional work paled in comparison. He distilled his encouragement for the next generation into two words: **dedication** and **knocking on doors**. He shared a photograph of an early meeting in Prof. Oweis’s WHO office – an unplanned moment that symbolized how a clear, structured vision, when presented by committed young nurses, can open doors that lead to regional movements. He urged young nurses to be dedicated and to knock on doors with a vision, not merely fishing for opportunities. Prof. Oweis added that doors will open when you bring something meaningful to the table.

4.4 Q&A and Take-Home Messages

Responding to a question from Warda (Egypt) on how to advocate effectively for the rights of nursing students and early-career nurses, each panelist offered a one-minute take-home message:

- **Prof. Dumit:** Believe in yourself, believe in the nurse in you. Dare, take the risk, engage, and act. Knock at the door, even as a student.
- **Prof. Oweis:** To ask for your rights, you must first know your duties – professional duties and duties to yourself to build knowledge, competency, and understanding of the system. Advocate from a position of knowledge, not just emotion.
- **Prof. El-Banna:** Advocate with knowledge, respect, confidence, and compassion.
- **Dr. Esleem:** Focus on research; do not let it remain trapped in academic journals. Use it to influence policy, protect health workers, and position nurses as leaders.
- **Hagar Ibrahim (moderator):** As a newly graduated nurse, she shared that courage is essential, that feeling small and lacking experience is normal, and that the path forward lies in seeking knowledge, finding mentors, and “taking it till you make it” – a strategy she was already putting into practice.

4.5 Closing Remarks

Prof. Majeda El-Banna, Dean of the College of Nursing, Qatar University, and EMR-YNI Advisory Board Member, delivered the closing remarks. She synthesized the discussion around three power bases: knowledge (regulation, laws, policies), experience (accountability and ethical prudence), and relationships (standing together and building trust with communities). She highlighted the webinar’s

role in shifting the narrative from viewing nurses merely as a service provision function to recognizing them as cornerstones of health system leadership.

She reinforced EMR-YNI's core values and strategic objectives, calling on participants to:

- Reframe the nursing role as one of leadership.
- Translate frontline challenges into clear, policy-oriented messages.
- Invest in the nursing workforce through mentorship, research, education, and evidence-based advocacy.

Her closing message: *"When nurses are empowered, health systems are strengthened and lives are saved."*

The session concluded with Ahmed G. Sallam inviting all participants to join the EMR-YNI's working groups, share their advocacy messages via the initiative's Facebook page, and continue the dialogue beyond the webinar. He stressed, "We are not only the future; we are the present."

5. Participant Engagement and Profile

Based on the registration form analysis (5–11 May 2026), 112 individuals registered. Key characteristics:

Geographic distribution (17 countries):

Jordan (47.3%), Egypt (16.1%), Sudan (10.7%), Palestine (5.4%), Lebanon, Mauritania, Qatar (3.6% each), Saudi Arabia, Afghanistan (1.8% each), with additional participants from Pakistan, Bahrain, Canada, Nigeria, the Philippines, Syria, and the United Kingdom.

Professional roles:

- Nursing students: 26.8%
- Nurse educators/academics: 26.8%
- Youth nurses (<35 years): 22.3%
- Senior nurses (≥35 years): 9.8%
- Nurse managers/administrators: 7.1%
- Policymakers, midwives, civil society: the remaining share.

The audience thus comprised a near-equal mix of current students, early-career nurses, and senior faculty, creating genuine conditions for intergenerational dialogue.

Years of experience:

A full spectrum was represented, from students with no experience (33%) to professionals with 2–5 years (13.4%), 6–10 years (14.3%), 11–20 years (14.3%), and more than 30 years (10.7%). This diversity enriched the conversation.

Recruitment channels:

- Social media (Facebook): 50.9%
- Professional network (colleague, association): 26.8%
- WhatsApp/Telegram groups: 16.1%
- EMR-YNI email campaign: 5.4%

Facebook emerged as the dominant channel, while word-of-mouth and professional referrals proved highly effective.

Self-reported challenges (thematic analysis):

Participants identified workload and staffing shortages, student-specific challenges (balancing academic and clinical demands, theory-practice gaps, fear of mistakes), lack of professional development opportunities, burnout and psychological stress, weak leadership, societal stigma, safety and security risks, inadequate regulation, low salaries, and resource constraints. These challenges directly mirrored the issues addressed by the panel.

Mailing list consent: 94.6% of registrants agreed to receive future communications, indicating strong interest in sustained engagement with EMR-YNI.

6. Key Takeaways and Recurring Themes

1. **Intergenerational dialogue is a strategy, not just a format.** The webinar demonstrated that structured, respectful conversation between senior and youth nurses can surface shared values and practical wisdom while creating emotional solidarity across borders and contexts.
2. **Power bases are built, not given.** Prof. Dumit's framework – knowledge, experience, relationships – provided a concrete roadmap for youth nurses seeking influence, reinforced by all panelists.
3. **Advocacy requires knowledge of duties before demanding rights.** Multiple speakers insisted that professional advocacy must be grounded in competence, ethical conduct, and understanding of the system.

4. **Resilience has a purpose beyond endurance.** Dr. Esleem’s testimony transformed resilience from a passive concept into an active refusal to let extreme conditions define the limits of nursing impact. His message that “stopping is not neutral” became a rallying point.
5. **Collaboration must be taught and mandated.** The panel consensus was clear: interprofessional education cannot be optional. It must be embedded in curricula, research, and promotion criteria from the very start of nursing education.
6. **Youth nursing leadership is not a future promise – it is a present necessity.** Ahmed Sallam and Hagar Ibrahim embodied this principle, showing that early-career nurses can lead regional initiatives when they combine dedication with a clear vision and the courage to seek mentors.
7. **The region is in urgent need of a collective youth nursing voice.** The high registration numbers, diverse country representation, and post-webinar opt-ins all confirm a strong appetite for a unified platform that bridges fragile and stable settings.

7. Outcomes and Next Steps

The webinar produced the following immediate outcomes:

- A rich, transcribed, and recorded intergenerational dialogue that can serve as a resource for advocacy, education, and further policy development.
- A significant expansion of the EMR-YNI network, with 106 new consenting contacts and participants expressing interest in joining working groups.
- A cross-border social media advocacy campaign launched on the initiative’s Facebook page, featuring recorded messages from nurses in Morocco, Mauritania, Sudan, Pakistan, Bahrain, Afghanistan, and elsewhere.
- A strengthened foundation for the forthcoming Youth-Led EMR Nurses Position Statement.

Proposed follow-up actions:

1. **Distribute the recording and key messages** via the EMR-YNI website, Facebook page, and email list within one week.
2. **Finalize and disseminate the Youth-Led EMR Nurses Position Statement**, drawing directly on the webinar’s themes and participant-identified challenges.
3. **Activate working groups** (leadership development, research, education, community engagement, advocacy) and issue an open call for active members.
4. **Develop a mentorship program** pairing youth nurses from conflict-affected and low-resource settings with senior leaders.

5. **Plan a series of follow-up thematic webinars** addressing the top-cited challenges: workload and burnout, professional identity and stigma, and pathways to policy influence.
6. **Apply for formal partnership recognition** with WHO EMRO and national nursing associations, leveraging the webinar's demonstrated regional reach and engagement.
7. **Translate advocacy messages and key resources into Arabic and French** to ensure accessibility across the region.

8. Conclusion

The EMR-YNI International Nurses Day 2026 Webinar succeeded in creating a genuine intergenerational dialogue that honored the sacrifices of nurses in the region while pointing firmly toward action. It gave voice to a Gaza-based nurse who completed a PhD under bombardment, to a Lebanese leader who rewrote nursing laws, to Jordanian educators shaping the next generation, and to young nurses just beginning their journeys. It turned the ICN theme into a lived commitment: *Empower nurses to save lives*. The initiative now moves forward with a larger, more connected community and a clear mandate to transform words into sustained regional action.

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Date of Report: 11 May 2026